

# Village of Biggsville

## Hotel Use Tax Return

Pursuant to Village Ordinance #559

Name/Local Address of Hotel

Filing Quarter \_\_\_\_\_

Illinois Tax Number \_\_\_\_\_

Corporate Name/Mailing Address (if different)

### Computation of Hotel Use Tax Liability

1. Total receipts from room rentals (do not include taxes) \_\_\_\_\_
2. Exemption: Total receipts for permanent guests  
(Same room for 30 or more consecutive days) \_\_\_\_\_
3. Taxable receipts from room rentals (line 1 minus line 2) \_\_\_\_\_
4. 1% Hotel Tax (line 3 x .01) \_\_\_\_\_
5. If filed after due date, add 1% penalty (line 4 x 1%) \_\_\_\_\_
6. **Total Tax to be remitted** (Add lines 4 + 5) \_\_\_\_\_

Under penalties as provided by law, I declare that to the best of my knowledge and belief, the information on this Form is true, correct and complete.

\_\_\_\_\_  
Signature of Taxpayer

\_\_\_\_\_  
Signature of Preparer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Company Name

Date Signed

Telephone Number

Date Prepared

Telephone Number

**DUE: 20<sup>th</sup> of the month following the end of filing quarter**

- Make check payable to: **Village of Biggsville**
- Remit to: Village of Biggsville  
PO Box 154  
Biggsville, IL 61418

Questions : 309-627-2210  
biggsville1800@gmail.com

Forms available at : [www.villageofbiggsville.com](http://www.villageofbiggsville.com)